



PANHANDLE HEALTH DISTRICT

Healthy People in Healthy Communities

**DISTRICT 1 BOARD OF HEALTH MEETING
8500 N. ATLAS ROAD, HAYDEN, IDAHO 83835**

March 29, 2007

Minutes

8500 N. ATLAS ROAD
HAYDEN, IDAHO 83835
<http://www2.state.id.us/phd1>

Members Present: Chris Beck, Vice Chair
Allen Banks, Ph.D.
Dale VanStone
Richard McLandress, M.D.
Walt Kirby

Members Absent: Marlow Thompson, Chairman
Sharon Connors

Staff Present: Jeanne Bock
Tanya Chesnut
Mary DeTienne
Jim Fenton
Mashelle Kenney
Randi Lustig
Dick Martindale
Dale Peck
Cynthia Taggart
Lora Whalen

Guests: Jerry Mason, Attorney

Vice Chairman Beck called the Board of Health meeting to order at 1:05 p.m. Roll call was taken.

Review of Minutes—February 22, 2007, Board of Health Meeting – Chris Beck

Vice Chairman Beck asked if there were any corrections or changes to the minutes of the February 22, 2007, Board of Health meeting.

MOTION: Mr. Kirby moved to approve the minutes of the February 22, 2007, Board of Health meeting; seconded by Dr. Banks. All in favor; passed unanimously. Minutes approved as submitted.

PHD Rules – Jeanne Bock

- Ms. Bock reported that the Rules of Panhandle Health District 1 IDAPA 41 Title 01 Chapter 01 Section 100 subsection 06, vested rights, subsection 07 and speculative drainfield rules 41.01.01.100.07.a and b passed as well as 511 and 512 expanding the ICP into the basin. The rule changes will be adopted at the end of the current legislative session, however, the septic rule section, relating to water quality control, IDAPA 41.01.01, Panhandle Health District I, subsection 03.e and 03.f only, did not pass. Ms. Bock met with the legislators and it was decided to salvage those rules that did pass rather than withdraw the entire bill. Senator Goedde agreed to strike the septic rules only and keep the remaining rule changes. Senator Kelly and other H&W Senate committee members recommended that the septic rule be proposed again next year. Mr. Peck and Mr. Martindale suggest a point person to do more scientific research on the subject.

Mr. VanStone asked what criteria is being used now to determine drainfield sizing. Mr. Peck explained that the number of bedrooms is the criteria used, but determining what a bedroom is has been difficult, with differences over dens, libraries, etc. Bathrooms are not part of the criteria. Commercial buildings have a different set of criteria. Dr. Banks states that using bedrooms as the criteria makes sense because it defines the number of people living in the house. He asked if there have been many failures using this criteria. Mr. Peck explained that large homes on or near the lake that have only a few people living in them could potentially have many more people, i.e. parties, vacationers, or if they move and a large family reoccupies the home. Failures of this nature are happening. There is no ideal way of determining flows, therefore, PHD is seeking a better way to determine flows for what the house could potentially be used for. Mr. Beck added that regular flows vs. peak flows all have to be considered.

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Dr. McLandress stated that the Board sets policies based on statutory directives to protect the lakes, the environment and public health. PHD advertised and held 12 public meetings. The Board reviewed the proposed changes with the staff and unanimously agreed to proceed with the proposed changes. The Board's job is different than the developer, it is to protect public health. Dr. McLandress recommended that an outside expert could be hired to work with EH on this issue and that we stay on task to support rule changes that protect the environment.

Dr. Banks reported that the feedback he has received from legislators in his area was that the proposed changes were sneaked in with another bill, and that was why they were upset. They weren't against the actual change, but the way it was presented.

MOTION: Mr. Kirby moved that the board direct Health District staff to continue with these rule changes with next year's legislative session as a stand-alone bill. Dr. McLandress seconded the motion.

Discussion: Dr. McLandress suggested that a timeline be stipulated starting now. The motion should be amended to stipulate a timeline for the bill and a second amendment to involve legal counsel. Mr. VanStone asked if this bill were passed, would it make lots unbuildable. Mr. Peck explained that there are other options like easements to adjacent properties, or it may make the location of the system more difficult, but it wouldn't preclude building, it may make it more restrictive. The current rules as they are now do not protect the lake in the long-term.

Mr. Beck asked the Board if they were of favor of directing PHD staff to move forward with negotiations to bring this rule to legislative session next year. All were in favor of the motion as amended; passed unanimously. Motion carried.

Mr. Mason assured the Board that there was no concealment of this bill. Mr. Mason stated that the testimony was in writing in advance. When he testified, he was questioned by a Senator about one aspect of the rule. The remaining rules were not addressed. Mr. Mason explained that permits are issued on the current occupancy of a residence and the cost of a permit is nothing compared to the cost of a 10,000 sq foot home. If a system fails and there is no replacement area, the occupants must either cease occupancy or harm the environment.

Mr. VanStone asked what was the overriding issue: the cost or the inability to build a large home? Mr. Mason felt that it was such a change and that developers couldn't construct as many homes in a tight area. Mr. Beck explained that the Board's position and focus is to protect public health and that the developers will work within the guidelines of the rules.

FY 06 Epidemiology Report – Randi Lustig

Ms. Lustig distributed copies of the 2006 Surveillance Data and Format to the Board.

Ms. Lustig explained the history of data reporting since 1994. The reporting and data collection circle is now complete and the Epidemiology team can now evaluate the cycle of an investigation/outbreak.

- Chlamydia was the largest reported disease of 2006 with 430 cases. The largest age group is 14-24. PHD is part of the Chlamydia Project to test every female in the targeted age group that visits the Family and Community Health clinic.
- Since the 1998 Hepatitis A vaccine recommendation, Hepatitis A cases dropped significantly the following year.
- Most Hepatitis B cases are foreign born and the babies usually are infected prenatally.
- Tuberculosis cases are increasing.
- Two rabid bats were reported in District 1 in 2006. Two people received post-exposure prophylaxis.

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Fiscal Report – Jim Fenton

▪ **Proposed Fee Increases:**

◦ Home Health Division-Mary DeTienne

Ms. DeTienne presented the proposed fees that are outlined in the Home Health budget assumptions. Home Health fees have not increased since 2005. Ms. DeTienne explained that aide visits are high because they are benefited positions, travel costs, etc. The Health Maintenance fees have not changed since 2002. Nursing assessments for are typically two to three-hour visits and are extensive. Home Health and Health Maintenance rates are competitive with rates in the area.

◦ Family and Community Health (FACH) Division-Lora Whalen

Ms. Whalen presented the Board with the proposed FACH fees. FACH fees have not changed since 2005. Ms. Whalen requested that the Board adopt the APA methodology guidelines as a means to determine costs and fees.

◦ Environmental Health (EH) Division-Dale Peck

Mr. Peck stated that the proposed changes are noted on the handout he distributed. Mr. Peck explained that he considered a sliding fee scale based on the passing of the square footage rule. However, septic system fees based on size may be a disincentive for the public, therefore, he is proposing a flat fee, as current. There will no longer be a split fee for septic permit/site evaluation as in the past. Mr. Peck is proposing an application review fee for community and commercial drainfields. He explained that when there was a spike in permits being issued, staffing was increased and the spike has since leveled off, therefore, EH reduced one FTE. Staff today is spending more time with permits because they are generally the more difficult sites.

Mr. Peck is proposing a preliminary soil analysis fee for land development. This addresses the requests of the developers and EH will provide assurance with a letter of opinion to the county commissioners regarding a site's suitability for a septic system.

A fee for school cafeteria inspections is proposed, as well as a fee for restaurant plan reviews which is not subject to the regular food inspection fee.

Environmental Health would not require an increase in state and county dollars and would allow those general fund monies to pay for other PHD program services, such as IT. EH would no longer need to take from cash reserves. Mr. VanStone reminded the Board that it was a goal several years ago to make Environmental Health programs self-sufficient and they are getting closer.

MOTION: Dr. McLandress moved to accept the Family and Community Health Division's methodology for setting fees. Mr. VanStone seconded the motion. All were in favor; passed unanimously. Motion carried.

MOTION: Mr. Vanstone moved to allow PHD to proceed with advertising the fee increases for all three divisions to be heard at the April 12 Special Board of Health meeting. Seconded by Mr. Kirby. All were in favor; passed unanimously. Motion carried.

Dr. McLandress and Dr. Banks left at 3:00.

▪ **FY 08 Assumptions with Fee Increases**

Mr. Fenton distributed a draft budget summary for FY 2008. Total expenditures for FY08 are projected at \$12,738,100 and total income is projected to be \$12,766,000.

balance is \$588,000; the estimated portion that PHD hopes to receive from the sale of the Leuty building is \$200,000; and additional funds needed are \$891,694.

Mr. Fenton prepared some options for loan payments with varying principal payments and interest rates over 20, 15 or 10 year periods. Mr. Fenton doesn't want to burden the district with too much debt. He is concerned that borrowing \$1,000,000 would increase the debt ratio. Adding \$1,000,000 to the \$4,200,000 we already have would make the outstanding debt relatively high for an agency the District's size. The debt could be serviced, however, it begins to limit future options. The annual principal and interest payments on \$1,000,000 over 20 years are similar to the payments on \$ 600,000 over 10 years. Financing in the \$ 600,000 - \$ 700,000 range may require dropping the months of operating reserves to between 2.5 and 3 months. Cutting costs may mean cutting square footage and limiting the useful life of the building.

Mr. Fenton advised the Board that they will need to make a decision on how much to finance for the St. Maries building project soon.

Mr. Beck asked Ms. Bock and Mr. Fenton to update the absent Board members on the details of the St. Maries project, the FY08 assumptions and the fee increases.

Director's Report – Jeanne Bock

- **St. Maries Project**

Ms. Bock showed the Board a 3-D view of the St. Maries building. Architect's West incorporated characteristics of the old Kootenai Inn.

Ms. Bock will present the appraisal of the Leuty building at next meeting during Executive Session.

Ms. Bock informed the Board that she would get her anniversary summary, with goals, objectives and accomplishments to them.

Ms. Bock reported that she met with all the county commissioners and the 3% request was well received.

The next Board of Health meeting is scheduled for April 12, 2007, at 1:00. There being no further business, the meeting adjourned at 3:23 p.m.

Adjourn

Chris Beck, Vice Chairman Date

Jeanne Bock, Director and Date
Secretary to the Board